

PATENT

Docket No. 1798-7267

COMBINED DECLARATION AND POWER OF ATTORNEY FOR
ORIGINAL, DESIGN, NATIONAL STAGE OF PCT, SUPPLEMENTAL,
DIVISIONAL, CONTINUATION OR CONTINUATION-IN-PART APPLICATION

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name,

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

COMPOSITIONS FOR DRYING SOLID SURFACES

the specification of which

a. ☒ is attached hereto

b. ☐ was filed on _____ as application Serial No. _____ and
was amended on _____. (if applicable).

PCT FILED APPLICATION ENTERING NATIONAL STAGE

c. ☐ was described and claimed in International Application No. _____
filed on _____ and as amended on _____. (if any).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, § 1.56(a).

☒ I hereby claim foreign priority benefits under Title 35, United States Code § 119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

☒ The attached 35 U.S.C. § 119 claim for priority for the U.S. application(s) listed below forms a part of this declaration.

<u>Country</u>	<u>Application Number</u>	<u>Date of filing (day, month, yr)</u>	<u>Date of issue (day, month, yr)</u>	<u>Priority Claimed</u>
France	97.02550	04 March 1997		<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
				<input type="checkbox"/> YES <input type="checkbox"/> NO
				<input type="checkbox"/> YES <input type="checkbox"/> NO

I hereby claim the benefit under Title 35, United States Code § 120 of any United States application(s) listed below.

Application Serial No.	Filing Date	Status (patented, pending, abandoned)
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I hereby specify the following as the correspondence address to which all communications about this application are to be directed:

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SEND CORRESPONDENCE TO:

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date

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Full name of second joint inventor, if any ____

Inventor's signature* _____
date

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Citizenship ____

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